

UNITED STATES DISTRICT COURT
for the
MIDDLE DISTRICT OF TENNESSEE

U.S.A. vs. Ryan Moore

Docket No. 0650 3:13CR00097 - 24

Petition for Action on Conditions of Pretrial Release

COMES NOW Dariel S Blackledge-White, PRETRIAL SERVICES OFFICER
presenting an official report upon the conduct of defendant Ryan Moore
who was placed under pretrial release supervision by the Honorable E. Clifton Knowles, U.S. Magistrate Judge
sitting in the Court at Nashville, Tennessee, on June 07, 2013, under the following
conditions: Please reference the attached Order Setting Conditions of Release.

Respectfully presenting petition for action of Court and for cause as follows:
Please reference page two of this document.

I declare under penalty of perjury that the foregoing is true and correct.

Dariel S Blackledge-White
U.S. Pretrial Services Officer

Nashville, TN
Place:

February 5, 2014
Date:

Next Scheduled Court Event

Trial
Event

February 11, 2014
Date

PETITIONING THE COURT

- ☐ No Action
☐ To Issue a Warrant

- ☐ To issue an order setting a hearing on the petition
☒ Other The petition dated January 17, 2014, is
amended to include additional violations.

THE COURT ORDERS:

- ☐ No Action
☐ The Issuance of a Warrant.
☐ Sealed Pending Warrant Execution
(cc: U.S. Probation and U.S. Marshals only)
☒ Other

- ☐ A Hearing on the Petition is set for

Date

Time

Considered and ordered this 5th day
of February, 2014, and ordered filed
and made a part of the records in the above
case.

E. Clifton Knowles
Honorable E. Clifton Knowles
U.S. Magistrate Judge

Honorable E. Clifton Knowles
U.S. Magistrate Judge
2nd Superseding Petition for Action on
MOORE, Ryan
Case No. 3:13-CR-00097-24
February 5, 2014

The petition dated January 17, 2014, is superseded to include one additional count of Violation No. 2, and the addition of Violation No. 3. Additionally, the Violation, Probation Officer Action, and Pretrial Services recommendation sections have been edited.

On June 3, 2013, defendant Ryan Moore appeared before Your Honor for an Initial Appearance as a result of being charged with violating Title 21 U.S.C. § 846, Conspiracy to Possess With Intent to Distribute and to Distribute Oxycodone, Hydromorphone, and Oxymorphone, Schedule II Controlled Substances; and Buprenorphine, a Schedule III Controlled Substance. The Government did not file a Motion for Detention, and the defendant was released on a personal recognizance bond with pretrial supervision.

As Mr. Moore had an active state probation violation, on June 7, 2013, he was released on a detainer to Wilson County, Tennessee. On October 20, 2013, the defendant was released from local custody.

On November 20, 2013, Mr. Moore reported for pretrial supervision.

On January 7, 2014, the bond revocation hearing was continued to February 20, 2014, to monitor the defendant's compliance on Pretrial Supervision. Mr. Moore has again violated the conditions of his supervision.

Special Conditions of Release:

Please reference the attached Order Setting Conditions of Release.

VIOLATION(S):

Violation No. 1: Report to the U.S. Pretrial Services as directed.

On December 18, 2013, the defendant failed to report to the U.S. Probation and Pretrial Services Office for his scheduled monthly appointment.

As a sealed Arrest Warrant was issued for the defendant on January 7, 2014, this officer telephoned the defendant on January 9, 2014, at 9:54 a.m. and requested that he come into the probation office. Mr. Moore advised that he lacked transportation because his father's vehicle was being repaired. He expressed his belief that his father would pick the vehicle up from the automotive shop later in the evening and could bring him into the office the next day. This officer encouraged Mr. Moore to try to find a ride to Nashville on the date of the phone call. Further, Mr. Moore was instructed to call the supervising officer back to advise when he would come into the office.

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At the close of business on January 9, 2014, this officer had not heard from Mr. Moore. The U.S. Marshals Service District Fugitive Task Force Coordinator for the Middle District of Tennessee was contacted, and apprehension services were requested.

Violation No. 2: Submit to any testing required by the pretrial services officer or the supervising officer to determine whether the defendant is using a prohibited substance. Such methods may be used with random frequency and include urine testing, the wearing of a sweat patch, a remote alcohol testing system, and/or any form of prohibited substance screening or testing.

On December 13, 2013, Mr. Moore failed to report for a urine screen as directed. He also failed to report for make-up urine screens on December 16, 2013, and on January 9, 2014.

On January 29, 2014, the defendant failed to report for a urine screen as instructed. Additionally, on January 30, 2014, he failed to report, as directed, to the U.S. Probation and Pretrial Services Office for a make-up urine screen.

Violation No. 3: The defendant shall not commit any offense in violation of federal, state or local law while on release in this case.

On the evening of January 30, 2014, this officer received notification that the defendant had law enforcement contact with the Lebanon Police Department. Investigation revealed that on the same date at approximately 7:07 p.m., officers were dispatched to the Knights Inn in Lebanon, Tennessee, to investigate a possible methamphetamine laboratory. When they arrived on the scene, officers encountered a woman, Stephanie Mosley, who allowed them into her motel room. Investigation revealed the room housed a methamphetamine laboratory. A man, identified as Nathan Busard, was discovered hiding in the bathroom. Mr. Busard and Ms. Mosley were taken into custody.

Inside the motel room, officers discovered a camouflage backpack that Ms. Mosley indicated belonged to her. It contained Mason jars with residue, plastic tubing, coffee filters, lithium batteries, and drain cleaner. Additionally, Percocet, methadone, and alprazolam were observed in plain view. For safety reasons, officers removed occupants from other motel rooms located near the scene. The Tennessee Methamphetamine Task Force responded to decontaminate and clean up the motel room.

At approximately 9:50 p.m., officers received a tip that two male subjects located at the Pilot gas station in Lebanon, were watching the police activity at the motel. The caller indicated the men said they left their phones at the Knights Inn but would not retrieve them. Further, the caller advised the defendant had entered the women's restroom and left blood everywhere.

At approximately 10:26 p.m., Lebanon City Police Department officers were dispatched to the Pilot gas station and encountered the defendant and another individual, Christopher Wright. The arresting

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officer indicated Mr. Moore had red, bloodshot eyes and a white coating on his tongue. According to the officer, defendant Moore voluntarily displayed his arms, which had fresh "track marks" and bruises on them.

The defendant was taken into custody and transported back to the Knights Inn, located at 921 Murfreesboro Road, Lebanon, Tennessee. Mr. Moore consented to a search of his hotel room and was subsequently arrested and transported to booking. He was charged with Public Intoxication (Report No. 14-4806), and on January 31, 2014, defendant Moore was released on his own recognizance.

Of note, Mr. Wright possessed a red straw which contained white residue at the time of his arrest. He admitted he snorted methamphetamine.

Current Status of Case:

A jury trial has been scheduled for February 11, 2014, at 9:00 a.m.

Probation Officer Action:

On November 15, 2013, this officer received information that the defendant was released from local custody on October 20, 2013. Contact was made with Sparta Bail Bonds, located in Lebanon, Tennessee, who confirmed the defendant was on bond in an unrelated state criminal case. Efforts were made to locate the defendant, and on November 19, 2013, this officer spoke with the defendant via telephone. An initial intake interview was scheduled for November 20, 2013. During this interview, this officer addressed Mr. Moore's 30-day absence from federal pretrial supervision, and he was encouraged to report as instructed. He was also advised that the Court would have to pre-approve any residential change.

On December 14, 2013, this officer conducted a home assessment at Mr. Moore's residence. As he had missed a urine screen on the previous day, he was instructed to report to the U.S. Probation and Pretrial Services Office on the morning of December 16, 2013. Additionally, defendant Moore was instructed to contact Cumberland Mental Health Center, located in Lebanon, Tennessee, to schedule his substance abuse intake assessment. He failed to report for a drug screen as directed.

On December 16, 2013, the defendant's girlfriend, Nikki Speakman, called this officer to advise Mr. Moore was ill. On December 17, 2013, Ms. Speakman again contacted this officer and advised the defendant was taken to the hospital.

On January 9, 2014, this officer again requested the defendant report to the office for a urine screen. He failed to comply with this directive.

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On January 13, 2014, information was received that the defendant reported to Cumberland Mental Health, located in Lebanon, Tennessee, for a substance abuse assessment. The U.S. Marshals Service was advised of Mr. Moore's whereabouts, and local law enforcement was contacted. Defendant Moore was arrested when he exited Cumberland Mental Health. He was transported to the U.S. Marshals Service, and the sealed warrant was executed. It is noted that on this date, presumably after the defendant's arrest, his girlfriend, Nikki Speakman, telephoned the supervising officer to advise that Mr. Moore had been either ill or at the hospital. This officer requested that Ms. Speakman refrain from contacting the officer on behalf of the defendant.

At the conclusion of the defendant's Initial Appearance on January 13, 2014, he reported to the U.S. Probation and Pretrial Services Office. A drug test was administered, and Mr. Moore was negative for all substances.

On January 29, 2014, the defendant contacted this officer to advise he did not have a ride to the probation office. He was encouraged to find a ride to the office for his urine screen, but he did not report. On January 30, 2014, Mr. Moore was again prompted to report to the office for a urine screen. He did not report as instructed.

On January 31, 2014, at approximately 3:20 p.m., the defendant reported to the U.S. Probation and Pretrial Services Office. He submitted a urine screen that was negative for all substances. Mr. Moore advised this officer of his new arrest and he denied he was drunk. He reported he has red eyes due to medical reasons. Further, Mr. Moore denied he was given the opportunity to submit to a breathalyzer or blood alcohol test.

The defendant stated he stayed the night at the hotel with his girlfriend, Nikki Speakman, who has moved out of their residence. Defendant Moore reported he still lives at his residence. He was advised he has to obtain permission from the Court before he changes his residence.

This officer questioned whether Mr. Moore has used intravenous drugs. He admitted he last used intravenous drugs in June 2013. The supervising officer viewed the defendant's arms and feet, and there were no visible signs of immediate intravenous drug use. Mr. Moore was strongly encouraged to explore his transportation options so that he may report for drug screens as scheduled. Further, he was informed the Court would be notified of his noncompliance.


Respectfully Petitioning the Court as Follows:

Based upon Mr. Moore's initial failure to report to the U.S. Probation and Pretrial Services when released from custody in October 2013, his failure to report for urine screens in December 2013, and in January 2014, along with his new arrest for Public Intoxication, Pretrial Services opines that Mr. Moore is incapable of fully complying with the conditions of his pretrial supervision. Therefore, it is respectfully recommended that the defendant be ordered to appear before the Court to show cause as to why his bond should not be revoked.

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Assistant United States Attorney Brent Hannafan has been advised of the violation.

Approved:



Vidette A. Putman
Supervisory U.S. Probation Officer

xc: Brent Hannafan, Assistant U.S. Attorney
David Heroux, Defense Counsel

Enclosures

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P <input type="checkbox"/> PETITION W <input type="checkbox"/> WARRANT SUS <input type="checkbox"/> SUSPECT OFF <input type="checkbox"/> OFFENDER FI <input type="checkbox"/> FIELD INTERVIEW ARR <input checked="" type="checkbox"/> ADULT ARREST MP <input type="checkbox"/> MISSING PERSON JUV <input type="checkbox"/> JUVENILE ARREST RUN <input type="checkbox"/> RUNAWAY		ARREST DATE: <u>1-30-14</u> ARREST TIME: <u>22:26</u>		CASE # <u>14-4806</u> ARRESTED <u>1</u> OF <u>2</u>		1. <u>0040 (4)</u> 2. 3. 4. 5. 6.	
TYPE OF ARREST: O <input checked="" type="checkbox"/> ON-VIEW S <input type="checkbox"/> SUMMONED/CITED T <input type="checkbox"/> TAKEN INTO CUSTODY		ARRESTEE ARMED WITH: 0 <input checked="" type="checkbox"/> UNARMED 11 <input type="checkbox"/> FIREARM 12 <input type="checkbox"/> HANDGUN 13 <input type="checkbox"/> RIFLE		14 <input type="checkbox"/> SHOTGUN 15 <input type="checkbox"/> OTHER WEAPON 16 <input type="checkbox"/> CUTTING INSTRUMENT 17 <input type="checkbox"/> CLUB / BRASS KNUCKLES		DISPOSITION OF ARREST UNDER 18: H <input type="checkbox"/> HANDLED WITHIN DEPARTMENT R <input type="checkbox"/> REFERRED TO OTHER AUTHORITY	
LOCATION OF ARREST: <u>PILOT / MURFREESBORO RD.</u>		ARREST #: <u>1</u>		DR. LICENSE #: <u>115931377</u>		STATE: <u>TN</u>	
SOCIAL SECURITY #: <u>414-69-3652</u>		NAME: LAST: <u>WRIGHT</u> FIRST: <u>CHRISTOPHER</u> MIDDLE: <u>TODD</u>		ALIAS:		HOUSE#: <u>137</u> STREET ADDRESS: <u>REAN AVE</u> CITY: <u>CARTHAGE</u> STATE: <u>TN</u> ZIP CODE: <u>37030</u>	
AGE: <u>22</u> DOB: <u>10-24-91</u>		SEX: <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> UNKNOWN		RACE: <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> INDIAN <input type="checkbox"/> ASIAN <input type="checkbox"/> OTHER		ETHNICITY: <input type="checkbox"/> HISPANIC <input checked="" type="checkbox"/> NON-HISPANIC <input type="checkbox"/> UNKNOWN	
HEIGHT: <u>5'6"</u> FEET: <u>5</u> INCHES: <u>6</u>		WEIGHT: <u>135</u>		EYES: <input type="checkbox"/> ALBINO <input type="checkbox"/> BLACK <input type="checkbox"/> BLUE <input type="checkbox"/> BROWN		HAIR: <input checked="" type="checkbox"/> BLACK <input type="checkbox"/> BLONDE <input type="checkbox"/> BROWN <input type="checkbox"/> DARK BROWN	
OFF. PRESENT: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		OCCUPATION: <u>N/A</u>		EMPLOYED BY: <u>N/A</u>		SCHOOL: <u>N/A</u>	
HANDICAP?: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HOW: <u>N/A</u>		GANG AFFILIATION: <u>UNK</u>		DRUG TEST: <u>N/A</u> TYPE:	
TATTOOS...DESCRIBE		AMPUTATIONS...DESCRIBE		DEFORMITIES...DESCRIBE		SCARS...DESCRIBE	
OTHER TRAITS...DESCRIBE		COURT: <u>GS II</u>		DATE AND TIME: <u>3-24-14 @ 900</u>		RESULTS: <u>N/A</u>	
DISTINCT FEATURES: 01 <input type="checkbox"/> AMPUTATION 02 <input type="checkbox"/> ARTIFICIAL LIMB 03 <input type="checkbox"/> BLIND 04 <input type="checkbox"/> CANE/CRUTCH 05 <input type="checkbox"/> CRIPPLED 06 <input type="checkbox"/> DEFORMED LIMBS 07 <input type="checkbox"/> GROWTH/MOLE 08 <input type="checkbox"/> HEARING AID 09 <input type="checkbox"/> LIMP 10 <input type="checkbox"/> SKIN DISCOLORIZATION 11 <input type="checkbox"/> SPASTIC MOVEMENTS 12 <input type="checkbox"/> WHEELCHAIR 13 <input type="checkbox"/> HANDICAPPED 99 <input checked="" type="checkbox"/> OTHER				APPEARANCE: 01 <input type="checkbox"/> CASUAL 02 <input checked="" type="checkbox"/> DIRTY 03 <input type="checkbox"/> DISGUISE 04 <input type="checkbox"/> FLASHY 05 <input type="checkbox"/> MILITARY 06 <input type="checkbox"/> WELL GROOMED 07 <input type="checkbox"/> ANGRY 08 <input type="checkbox"/> CALM 09 <input type="checkbox"/> DISORGANIZED 10 <input type="checkbox"/> NERVOUS 11 <input type="checkbox"/> POLITE 12 <input type="checkbox"/> VIOLENT 99 <input type="checkbox"/> OTHER			
FACIAL SHAPE: 01 <input type="checkbox"/> BROAD 02 <input type="checkbox"/> HIGH CHEEKBONES 03 <input type="checkbox"/> LONG 04 <input checked="" type="checkbox"/> OVAL 05 <input type="checkbox"/> ROUND 06 <input type="checkbox"/> SQUARE 07 <input type="checkbox"/> THIN/LONG 99 <input type="checkbox"/> OTHER				BODY BUILD: 01 <input type="checkbox"/> THIN 02 <input checked="" type="checkbox"/> MEDIUM/AVERAGE 03 <input type="checkbox"/> STOCKY 04 <input type="checkbox"/> HEAVY 05 <input type="checkbox"/> OBESE 09 <input type="checkbox"/> SMALL 10 <input type="checkbox"/> LARGE 11 <input type="checkbox"/> MUSCULAR 99 <input type="checkbox"/> OTHER			
TEETH: 01 <input type="checkbox"/> BRACES 02 <input type="checkbox"/> CROOKED/BROKEN 03 <input checked="" type="checkbox"/> CROOKED 04 <input type="checkbox"/> FALSE 05 <input type="checkbox"/> GAPS BETWEEN 06 <input type="checkbox"/> GOLD CAPPED 07 <input type="checkbox"/> SILVER CAPPED 08 <input type="checkbox"/> MISSING 09 <input type="checkbox"/> STAINED/DECAYED 10 <input type="checkbox"/> JEWEL STUDDED 11 <input type="checkbox"/> NORMAL 99 <input type="checkbox"/> OTHER		COMPLEXION: 01 <input type="checkbox"/> PALE/SHALLOW 02 <input type="checkbox"/> LIGHT/FAIR 03 <input checked="" type="checkbox"/> MEDIUM/AVERAGE 04 <input type="checkbox"/> DARK 05 <input type="checkbox"/> TANNED 06 <input type="checkbox"/> JAUNDICED 07 <input type="checkbox"/> ACNE 08 <input type="checkbox"/> FRECKLED 09 <input type="checkbox"/> POCKED 10 <input type="checkbox"/> RUDDY 11 <input type="checkbox"/> CLEAR 12 <input type="checkbox"/> OLIVE 13 <input type="checkbox"/> WEATHERED 14 <input type="checkbox"/> WRINKLED 15 <input type="checkbox"/> UNKNOWN 99 <input type="checkbox"/> OTHER		FACIAL HAIR: 01 <input type="checkbox"/> NOT APPLICABLE 02 <input type="checkbox"/> CLEAN SHAVEN 03 <input checked="" type="checkbox"/> UNSHAVEN 04 <input type="checkbox"/> SIDEBURNS 05 <input type="checkbox"/> MUSTACHE 06 <input type="checkbox"/> FU MANCHU 07 <input type="checkbox"/> LOWER LIP 08 <input type="checkbox"/> GOATEE 09 <input type="checkbox"/> FULL BEARD 10 <input type="checkbox"/> SCRAGGLY BEARD 11 <input type="checkbox"/> SHORT BEARD 12 <input type="checkbox"/> THIN MUSTACHE 13 <input type="checkbox"/> THICK MUSTACHE 99 <input type="checkbox"/> OTHER			
LENGTH OF HAIR: 01 <input type="checkbox"/> SHAVED 02 <input type="checkbox"/> BALD 03 <input type="checkbox"/> BALDING 04 <input type="checkbox"/> SHORT 05 <input type="checkbox"/> NECK LENGTH 06 <input checked="" type="checkbox"/> COLLAR LENGTH 07 <input type="checkbox"/> SHOULDER LENGTH 08 <input type="checkbox"/> LONG 09 <input type="checkbox"/> PUNK STYLE 99 <input type="checkbox"/> OTHER		HAIR SHADED/TYPER: 01 <input type="checkbox"/> LIGHT 02 <input checked="" type="checkbox"/> DARK 03 <input type="checkbox"/> HIGHLIGHTED 04 <input type="checkbox"/> DYED 05 <input type="checkbox"/> THICK 06 <input type="checkbox"/> WIRY 07 <input type="checkbox"/> FINE 08 <input type="checkbox"/> THIN 09 <input type="checkbox"/> RECEDING 10 <input type="checkbox"/> WIG 99 <input type="checkbox"/> OTHER		HAIR STYLE: 01 <input type="checkbox"/> NOT APPLICABLE 02 <input type="checkbox"/> AFRO 04 <input type="checkbox"/> BUSHY 05 <input type="checkbox"/> CREW CUT 06 <input type="checkbox"/> MILITARY 07 <input checked="" type="checkbox"/> PONYTAIL 08 <input type="checkbox"/> PROCESSED 09 <input type="checkbox"/> STRAIGHT 10 <input type="checkbox"/> WAVY/CURLY 11 <input type="checkbox"/> FLAT TOP 12 <input type="checkbox"/> GREASY 13 <input type="checkbox"/> MOHAWK 14 <input type="checkbox"/> PUNK 15 <input type="checkbox"/> BANGS 16 <input type="checkbox"/> CENTER PART 17 <input type="checkbox"/> COMBED BACK 18 <input type="checkbox"/> DIRTY 19 <input type="checkbox"/> SIDE PART 20 <input type="checkbox"/> STYLED 99 <input type="checkbox"/> OTHER			
SPEECH: 01 <input checked="" type="checkbox"/> NORMAL 02 <input type="checkbox"/> ACCENT - US 03 <input type="checkbox"/> ACCENT - FOREIGN 04 <input type="checkbox"/> NON-ENGLISH 05 <input type="checkbox"/> HIGH PITCHED 06 <input type="checkbox"/> LOW PITCHED 07 <input type="checkbox"/> NASAL 08 <input type="checkbox"/> RASPY 09 <input type="checkbox"/> STUTTERS 10 <input type="checkbox"/> DEEP 11 <input type="checkbox"/> DISGUISED 12 <input type="checkbox"/> SLURRED 13 <input type="checkbox"/> OTHER 14 <input type="checkbox"/> SPEECH IMPEDIMENT 99 <input type="checkbox"/> OTHER		GLASSES/CONTACTS: 01 <input checked="" type="checkbox"/> NONE 02 <input type="checkbox"/> YES/UNKNOWN TYPE 03 <input type="checkbox"/> PRESCRIPTION 04 <input type="checkbox"/> SUNGLASSES 05 <input type="checkbox"/> CONTACT LENS 06 <input type="checkbox"/> DESIGNER 99 <input type="checkbox"/> OTHER		MARITAL STATUS: 01 <input checked="" type="checkbox"/> SINGLE 02 <input type="checkbox"/> MARRIED 03 <input type="checkbox"/> DIVORCED 04 <input type="checkbox"/> WIDOW 05 <input type="checkbox"/> SEPARATED 06 <input type="checkbox"/> HOMOSEXUAL 07 <input type="checkbox"/> COHABITATING 99 <input type="checkbox"/> OTHER			
NAME/ PIN# <u>C. BRYAN / 1057</u>		EARRINGS: <input type="checkbox"/> YES <input type="checkbox"/> NO U.S. CITIZEN: <input type="checkbox"/> YES <input type="checkbox"/> NO CLOTHING: <u>BLUE JEANS</u> <u>BLACK HOODY</u> PLACE OF BIRTH: <u>UNK</u>		PAGE <u>3 of 6</u>			

615 443 3960

Albion drunk
REPORT

Albion drunk
REPORT

TYPE OF PROPERTY LOSS/ETC:

(1) Burned (2) Damaged (3) Evidence (4) Forged/Counterfeit (5) Lost (6) None
(7) Recovered (8) Seized (9) Stolen (10) Towed (11) Other (12) Found

PROPERTY DESCRIPTION:

(01) Aircraft	(15) Construction Equipment	(29) Structure-Single Occupancy
(02) Alcohol	(16) Household Goods	(30) Structure-Other Dwelling
(03) Automobile	(17) Jewelry	(31) Structure-Commercial
(04) Bicycle	(18) Livestock	(32) Structure-Industrial
(05) Buses	(19) Merchandise	(33) Structure-Public
(06) Clothes/Fur	(20) Money	(34) Structure-Storage
(07) Computer	(21) Negotiable Instruments	(35) Structure-Other
(08) Consumable Goods	(22) Non-Negotiable Instruments	(36) Tools Power/Hand
(09) Credit/Debit Cards	(23) Office Equipment	(37) Trucks
(10) Drugs/Narcotics	(24) Other Motor Vehicle	(38) Vehicle Parts
(11) Drug/Narcotic Equipment	(25) Purses/Handbags/Wallets	(39) Watercraft
(12) Farm Equipment	(26) Radios/TVs/VCRs	(77) Other/Misc
(13) Firearms	(27) Recording Audio/Visual	(88) Pending Inventory
(14) Gambling Equipment	(28) Recreational Vehicle	(99)

[illegible]

LEBANON POLICE DEPARTMENT

INCIDENT REPORT

Case # 14-4788 Occurred on: 1 / 30 / 14 to 1 / 30 / 14 Occurred Time 19 : 02 to 19 : 02

Report Date: 1 / 30 / 14 Report Time: 19 : 02 Reporting Officer PIN: 0042

Reporting Officer: J. Avila Other PINs: 1099, 1057, 1043, 1041 Location of Incident: House # 903

1st Street: Murfreesboro Rd Apt #: 1418 Zone: A

NCIC Code: (1) 0010 Description: (1) Drugs - manufacture Schedule 2 A/C Q/M
 (2) 0013 (2) Possession of Methamphetamine A/C Q/M
 (3) 0034 (3) Drugs - possession Sch 2 w/ Intent A/C Q/M
 (4) 0040 (4) Drugs - Simple Possession A/C FAD
 (5) 0040 (5) Drugs - paraphernalia A/C FAD

Location: (01) Air/Bus/Train Terminal (09) Drug Store/Dr's Office/Hospital (17) Liquor Store
 (02) Bank/Savings and Loan (10) Field/Woods (18) Parking Lot
 (03) Bar/Night Club (11) Government/Public Building (19) Rental/Storage
 (04) Church/Synagogue/Temple (12) Grocery/Supermarket (20) Residence/Home
 (05) Office Building (13) Highway/Road/Alley (21) Restaurant
 (06) Construction Site (14) Hotel/Motel (22) School/College
 (07) Convenience Store (15) Jail/Prison (23) Gas Station
 (08) Department Store (16) Lake/Waterway (24) Specialty Store
 (25) Other/Unknown

Bias Code: _____ Number of Premises Entered: 2 Method of Entry: (Force) No Force Home Invasion: (Yes) No

Offender Used: (Alcohol) (Computer Equipment) Drugs (Not Applicable) Type of Criminal Activity: _____

Weapon Used: (11) Firearm (15) Other Firearm (40) Personal Weapon (70) Narcotics
 (12) Handgun (20) Knife (50) Poisoning (85) Asphyxiation
None (13) Rifle (30) Blunt Object (60) Explosives (90) Other
 (14) Shotgun (35) Motor Vehicle (65) Fire/Incendiary (95) Unknown

Family Violence: (Yes) No Gang Activity: (Yes) No (Unk) Type of Gang Activity: _____

Reviewed by PIN: 0042 Assigned to PIN: _____ Case Status: (Open) (Closed) (Active)

Name Reason Code: (VDM) Victim of Domestic (VIND) Victim is Individual (VBUS) Victim is Business
 (VGOV) Victim is Government (VFIN) Victim is Financial (VPOL) Victim is Police
 # 1 (VREL) Victim is Religious Org. () Victim is Complainant (VUNK) Victim is Unknown
 (COM) Complainant (VSOC) Victim is Society (WIT) Witness

SSN: - - Last Name: Stake First: of Tenn MI: _____ DOB: / / Sex: _____ Race: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Employer: _____ Home Phone: () - _____ Work Phone: () - _____

Injury Type: (N) None (B) Broken Bones (I) Internal Injury (L) Severe Laceration (M) Minor Injury
 (O) Major Injury (T) Loss of Teeth (U) Unconsciousness

Relationship of Victim to Offender: ST Victim connected to Offense #: 1, 2, 3, 4, 5

(SE) Spouse (GP) Grandparent (SS) Step Sibling (BE) Baby Sitter (EE) Employee
 (CS) Common Law Spouse (GC) Grandchild (OF) Other Family (BG) Boy/Girl Friend (ER) Employer
 (PA) Parent (IL) In-Law (AQ) Acquaintance (CF) Child of bg (RU) Unknown
 (SB) Sibling (SP) Step Parent (FR) Friend (HH) Homosexual Rel. Stranger
 (CH) Child (SC) Step Child (NE) Neighbor (XS) Ex Spouse (VO) Vic / Off

Was victim a college student: (Yes) No Did offense occur on campus: (Yes) No

Domestic Violence: DV Form (Yes) (No) HomeSafe (Yes) (No) Arrest Made: (Yes) (No)

Was children harmed: (Yes) (No) (None) Was a violation of an order of protection involved? (Yes) (No)

Negligent Manslaughter: _____ Justifiable Homicide: _____ Officer Killed or Assaulted: _____

LPD FORM 01 03/99

Page 1 of 9

Δ at hotel (ran by Leb. City
 Police Dept)

pp.

68 - nothing attached
 (states see attached)

LEBANON POLICE DEPARTMENT

INCIDENT REPORT

Case # <u>14-4788</u> Occurred on: <u>1 / 30 / 14</u> to <u>1 / 30 / 14</u> Occurred Time <u>19 : 30</u> to <u>19 : 30</u>	
Report Date: <u>1 / 30 / 14</u> Report Time: <u>19 : 02</u> Reporting Officer PIN: <u>0042</u>	
Reporting Officer: <u>J. Pruitte</u> Other PINs: <u>1099, 1057, 1043, 1081</u> Location of Incident: House # <u>903</u>	
1 st Street: <u>Murfreesboro Rd</u> Apt #: <u>148</u> Zone: <u>A</u>	
NCIC Code: (1) <u>1032</u> Description: (1) <u>Aggravated Assault</u>	(2) <u>Aggravated Assault</u> (3) <u>Aggravated Assault</u> (4) <u>Aggravated Assault</u> (5) <u>Aggravated Assault</u>
Location: (01) Air/Bus/Train Terminal (02) Bank/Savings and Loan (03) Bar/Night Club (04) Church/Synagogue/Temple (05) Office Building (06) Construction Site (07) Convenience Store (08) Department Store (09) Drug Store/Dr's Office/Hospital (10) Field/Woods (11) Government/Public Building (12) Grocery/Supermarket (13) Highway/Road/Alley (14) <u>Hotel/Motel</u> (15) Jail/Prison (16) Lake/Waterway (17) Liquor Store (18) Parking Lot (19) Rental/Storage (20) Residence/Home (21) Restaurant (22) School/College (23) Gas Station (24) Specialty Store (25) Other/Unknown	
Bias Code: _____ Number of Premises Entered: <u>2</u> Method of Entry: (Force) <u>No Force</u> Home Invasion: (Yes) <u>No</u>	
Offender Used: (Alcohol) (Computer Equipment) <u>Drugs</u> (Not Applicable) Type of Criminal Activity: _____	
Weapon Used: (11) Firearm (12) Handgun (13) Rifle (14) Shotgun (15) Other Firearm (20) Knife (30) Blunt Object (35) Motor Vehicle (40) Personal Weapon (50) Poisoning (60) Explosives (65) Fire/Incendiary (70) Narcotics (85) Asphyxiation (90) Other (95) Unknown	
Family Violence: (Yes) <u>No</u> Gang Activity: (Yes) <u>No</u> (Unk) Type of Gang Activity: _____	
Reviewed by PIN: <u>0042</u> Assigned to PIN: _____ Case Status: (Open) (Closed) (Active)	
Name Reason Code: (VDM) Victim of Domestic (VGOV) Victim is Government (VREL) Victim is Religious Org. (COM) Complainant (VIND) Victim is Individual (VFIN) Victim is Financial () Victim is Complainant (VSOC) Victim is Society (VBUS) Victim is Business (VPOL) Victim is Police (VUNK) Victim is Unknown (WIT) Witness	
SSN: _____ Last Name: <u>Stake</u> First: <u>of Jean</u> MI: _____ DOB: _____ Sex: _____ Race: _____	
Street Address: _____ City: _____ State: _____ Zip: _____	
Employer: _____ Home Phone: () _____ Work Phone: () _____	
Injury Type: (N) <u>None</u> (B) Broken Bones (I) Internal Injury (L) Severe Laceration (M) Minor Injury (O) Major Injury (T) Loss of Teeth (U) Unconsciousness	
Relationship of Victim to Offender: <u>ST</u> Victim connected to Offense #: <u>1</u>	
(SE) Spouse (GP) Grandparent (SS) Step Sibling (BE) Baby Sitter (EE) Employee (CS) Common Law Spouse (GC) Grandchild (OF) Other Family (BG) Boy/Girl Friend (ER) Employer (PA) Parent (IL) In-Law (AQ) Acquaintance (CF) Child of bg (RU) Unknown (SB) Sibling (SP) Step Parent (FR) Friend (HH) Homosexual Rel. <u>Stranger</u> (CH) Child (SC) Step Child (NE) Neighbor (XS) Ex Spouse (VO) Vic / Off	
Was victim a college student: (Yes) <u>No</u> Did offense occur on campus: (Yes) <u>No</u>	
Domestic Violence: DV Form (Yes) (No) HomeSafe (Yes) (No) Arrest Made: (Yes) (No)	
Was children harmed: (Yes) (No) (None) Was a violation of an order of protection involved? (Yes) (No)	
Negligent Manslaughter: _____ Justifiable Homicide: _____ Officer Killed or Assaulted: _____	

LEBANON POLICE DEPARTMENT

PROPERTY REPORT

TYPE OF PROPERTY LOSS/ETC:

(1) Burned (2) Damaged (3) Evidence (4) Forged/Counterfeit (5) Lost (6) None
 (7) Recovered (8) Seized (9) Stolen (10) Towed (11) Other (12) Found

PROPERTY DESCRIPTION:

(01) Aircraft (15) Construction Equipment (29) Structure-Single Occupancy
 (02) Alcohol (16) Household Goods (30) Structure-Other Dwelling
 (03) Automobile (17) Jewelry (31) Structure-Commercial
 (04) Bicycle (18) Livestock (32) Structure-Industrial
 (05) Buses (19) Merchandise (33) Structure-Public
 (06) Clothes/Fur (20) Money (34) Structure-Storage
 (07) Computer (21) Negotiable Instruments (35) Structure-Other
 (08) Consumable Goods (22) Non-Negotiable Instruments (36) Tools Power/Hand
 (09) Credit/Debit Cards (23) Office Equipment (37) Trucks
 (10) Drugs/Narcotics (24) Other Motor Vehicle (38) Vehicle Parts
 (11) Drug/Narcotic Equipment (25) Purses/Handbags/Wallets (39) Watercraft
 (12) Farm Equipment (26) Radios/TVs/VCRs (77) Other/Misc
 (13) Firearms (27) Recording Audio/Visual (88) Pending Inventory
 (14) Gambling Equipment (28) Recreational Vehicle (99)

Type	Code	Qty.	Property Description: Make, Model, Serial #, Type, Brand, VIN, Year, Color, License Plate & Year For Drugs: Type and Estimated quantity	Value	NCIC
3	77	1	20oz Drain Out	\$5	
3	77	1	50 packs (Cotton Swabs)	\$1	
3	77	1	vials	\$1	
3	77	1	Misc Tools	\$10	
3	77	1	32oz Coleman Fuel	\$5	
3	77	1	Acrylic Crystal Drain Out 2lbs	\$5	
3	77	1	Tape (Black)	\$1	
3	77	1	Grinder	\$1	
3	77	1	Blue Container	\$1	
3	77	1	Equate Cold Compress pack	\$2	
3	77	1	Plastic Tubing	\$10	
3	77	1	Empty 20oz HCL generator	\$1	
3	77	16	Lithium batteries	\$20	
3	77	1	20oz Empty bottle	\$0	
3	77	1	20oz Morton Salt	\$1	
3	77	1	20oz Great Value Salt	\$1	
3	77	3	Mason Jars	\$1	
3	77	1	Plastic Funnel	\$1	
3	77	1	Pyrex 2 cup measuring cup	\$1	
3	77	2	Box of 100 of filters	\$2	
3	77	1	Baggie w/ Ammonia Nitrate	\$1	
3	77	3	Syringes	\$1	
3	77	1	Red bowl w/ residue	\$1	

PROPERTY REPORT

(1) Burned	(2) Damaged	(3) Evidence	(4) Forged/Counterfeit	(5) Lost	(6) None
(7) Recovered	(8) Seized	(9) Stolen	(10) Towed	(11) Other	(12) Found

(01) Aircraft	(15) Construction Equipment	(29) Structure-Single Occupancy
(02) Alcohol	(16) Household Goods	(30) Structure-Other Dwelling
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(06) Clothes/Fur	(20) Money	(34) Structure-Storage
(07) Computer	(21) Negotiable Instruments	(35) Structure-Other
(08) Consumable Goods	(22) Non-Negotiable Instruments	(36) Tools Power/Hand
(09) Credit/Debit Cards	(23) Office Equipment	(37) Trucks
(10) Drugs/Narcotics	(24) Other Motor Vehicle	(38) Vehicle Parts
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(12) Farm Equipment	(26) Radios/TVs/VCRs	(77) Other/Misc
(13) Firearms	(27) Recording Audio/Visual	(88) Pending Inventory
(14) Gambling Equipment	(28) Recreational Vehicle	(99) _____

615 443 3960

P <input type="checkbox"/> PETITION W <input type="checkbox"/> WARRANT SUS <input type="checkbox"/> SUSPECT OFF <input type="checkbox"/> OFFENDER FI <input type="checkbox"/> FIELD INTERVIEW AR <input type="checkbox"/> ARREST MP <input type="checkbox"/> MISSING PERSON JUV <input type="checkbox"/> JUVENILE ARREST RUN <input type="checkbox"/> RUNAWAY		ARREST DATE: 1-30-14 ARREST TIME: 1940 TYPE OF ARREST: S <input type="checkbox"/> SUMMONED/CITED T <input type="checkbox"/> TAKEN INTO CUSTODY		CASE # 14-4788 ARRESTED 1 OF 2 ARRESTEE ARMED WITH: 11 <input type="checkbox"/> FIREARM 12 <input type="checkbox"/> HANDGUN 13 <input type="checkbox"/> RIFLE		1. 000 (F) 2. 0013 (F) 3. 0034 (M) X 4 4. 0040 (M) 5. 1032 (M) 6. 000 (F) DISPOSITION OF ARREST UNDER 18: H <input type="checkbox"/> HANDLED WITHIN DEPARTMENT R <input type="checkbox"/> REFERRED TO OTHER AUTHORITY	
LOCATION OF ARREST: MURFREESBORO RD #148		ARREST #: 9		DR. LICENSE #: 101560872		STATE: TN	
SOCIAL SECURITY #: 243-41-6266		NAME: LAST: MOSLEY FIRST: STEPHANIE MIDDLE: MARIE		ALIAS:			
HOUSE #: 121		STREET ADDRESS: W. JEFFERSON ST		CITY: CARTHAGE		STATE: TN	
AGE: 31		SEX: <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> UNKNOWN		RACE: <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> INDIAN <input type="checkbox"/> ASIAN <input type="checkbox"/> OTHER		ETHNICITY: <input type="checkbox"/> HISPANIC <input checked="" type="checkbox"/> NON-HISPANIC <input type="checkbox"/> UNKNOWN	
DOB: 2-20-82		RESIDENT STATUS: <input type="checkbox"/> RESIDENT <input checked="" type="checkbox"/> NON-RESIDENT <input type="checkbox"/> UNKNOWN		HOME: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		WORK: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
HEIGHT: 5'6"		WEIGHT: 180		EYES: <input checked="" type="checkbox"/> BROWN <input type="checkbox"/> ALBINO <input type="checkbox"/> GREEN <input type="checkbox"/> GRAY <input type="checkbox"/> HAZEL		HAIR: <input checked="" type="checkbox"/> BLACK <input type="checkbox"/> BLONDE <input type="checkbox"/> BROWN <input type="checkbox"/> DARK BROWN <input type="checkbox"/> LIGHT BROWN <input type="checkbox"/> GRAY <input type="checkbox"/> RED <input type="checkbox"/> UNKNOWN <input type="checkbox"/> COMPLETELY BALD	
FEET: 5'6"		FINGERPRINTED: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		HANDS: <input checked="" type="checkbox"/> RIGHT <input type="checkbox"/> LEFT <input type="checkbox"/> AMBIDEXTROUS		CELL/PAGER #: 6154195833	
OFF. PRESENT: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		OCCUPATION:		EMPLOYED BY: UNEMPLOYED		SCHOOL:	
HANDICAP?: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HOW:		GANG AFFILIATION:		DRUG TEST: TYPE:	
TATTOOS...DESCRIBE: FOUR LEAF CLOVER L WRIST		AMPUTATIONS...DESCRIBE:		DEFORMITIES...DESCRIBE:		SCARS...DESCRIBE:	
OTHER TRAITS...DESCRIBE:		COURT: GSI		DATE AND TIME: 4-15-14 1pm			
DISTINCT FEATURES:				APPEARANCE:			
01 <input type="checkbox"/> AMPUTATION 02 <input type="checkbox"/> ARTIFICIAL LIMB 03 <input type="checkbox"/> BLIND 04 <input type="checkbox"/> CANE/CRUTCH 05 <input type="checkbox"/> CRIPPLED 06 <input type="checkbox"/> DEFORMED LIMBS 07 <input type="checkbox"/> GROWTH MOLE 08 <input type="checkbox"/> HEARING AID 09 <input type="checkbox"/> LIMP 10 <input type="checkbox"/> SKIN DISCOLORIZATION 11 <input type="checkbox"/> SPASTIC MOVEMENTS 12 <input type="checkbox"/> WHEELCHAIR 13 <input type="checkbox"/> HANDICAPPED 14 <input checked="" type="checkbox"/> RECENT				01 <input checked="" type="checkbox"/> NEUTRAL 02 <input type="checkbox"/> DIRTY 03 <input type="checkbox"/> DISGUISE 04 <input type="checkbox"/> FLASHY 05 <input type="checkbox"/> MILITARY 06 <input type="checkbox"/> WELL GROOMED 07 <input type="checkbox"/> ANGRY 08 <input type="checkbox"/> CALM 09 <input type="checkbox"/> DISORGANIZED 10 <input type="checkbox"/> NERVOUS 11 <input type="checkbox"/> POLITE 12 <input type="checkbox"/> VIOLENT 13 <input type="checkbox"/> OTHER			
FACIAL SHAPE:				BODY BUILD:			
01 <input type="checkbox"/> BROAD 02 <input type="checkbox"/> HIGH CHEEKBONES 03 <input type="checkbox"/> LONG 04 <input checked="" type="checkbox"/> OVAL 05 <input type="checkbox"/> ROUND 06 <input type="checkbox"/> SQUARE 07 <input type="checkbox"/> THIN/LONG 08 <input type="checkbox"/> OTHER				01 <input type="checkbox"/> THIN 02 <input type="checkbox"/> MEDIUM/AVERAGE 03 <input type="checkbox"/> STOCKY 04 <input checked="" type="checkbox"/> MEDIUM 05 <input type="checkbox"/> OBESE 06 <input type="checkbox"/> SMALL 07 <input type="checkbox"/> LARGE 08 <input type="checkbox"/> MUSCULAR 09 <input type="checkbox"/> OTHER			
TEETH:		COMPLEXION:		FACIAL HAIR:			
01 <input type="checkbox"/> BRACES 02 <input type="checkbox"/> CROOKED/BROKEN 03 <input type="checkbox"/> CROOKED 04 <input type="checkbox"/> FALSE 05 <input type="checkbox"/> GAPS BETWEEN 06 <input type="checkbox"/> GOLD CAPPED 07 <input type="checkbox"/> SILVER CAPPED 08 <input type="checkbox"/> MISSING 09 <input type="checkbox"/> STAINED/DECAYED 10 <input type="checkbox"/> JEWEL STUDDED 11 <input checked="" type="checkbox"/> NORMAL 12 <input type="checkbox"/> OTHER		01 <input type="checkbox"/> PALE/SHALLOW 02 <input type="checkbox"/> LIGHT/FAIR 03 <input checked="" type="checkbox"/> MEDIUM/AVERAGE 04 <input type="checkbox"/> DARK 05 <input type="checkbox"/> TANNED 06 <input type="checkbox"/> JAUNDICED 07 <input type="checkbox"/> ACNE 08 <input type="checkbox"/> FRECKLED 09 <input type="checkbox"/> POKED 10 <input type="checkbox"/> RUDDY 11 <input type="checkbox"/> CLEAR 12 <input type="checkbox"/> OLIVE 13 <input type="checkbox"/> WEATHERED 14 <input type="checkbox"/> WRINKLED 15 <input type="checkbox"/> UNKNOWN 16 <input type="checkbox"/> OTHER		01 <input checked="" type="checkbox"/> NOT APPLICABLE 02 <input type="checkbox"/> CLEAN SHAVEN 03 <input type="checkbox"/> UNSHAVEN 04 <input type="checkbox"/> SIDEBURNS 05 <input type="checkbox"/> MUSTACHE 06 <input type="checkbox"/> FU MANCHU 07 <input type="checkbox"/> LOWER LIP 08 <input type="checkbox"/> GOATEE 09 <input type="checkbox"/> FULL BEARD 10 <input type="checkbox"/> SCRAGGLY BEARD 11 <input type="checkbox"/> SHORT BEARD 12 <input type="checkbox"/> THIN MUSTACHE 13 <input type="checkbox"/> THICK MUSTACHE 14 <input type="checkbox"/> OTHER			
LENGTH OF HAIR:		HAIR SHADED/TYPER:		HAIR STYLE:			
01 <input type="checkbox"/> SHAVED 02 <input type="checkbox"/> BALD 03 <input type="checkbox"/> BALDING 04 <input type="checkbox"/> SHORT 05 <input type="checkbox"/> NECK LENGTH 06 <input type="checkbox"/> COLLAR LENGTH 07 <input type="checkbox"/> SHOULDER LENGTH 08 <input checked="" type="checkbox"/> MEDIUM 09 <input type="checkbox"/> PUNK STYLE 10 <input type="checkbox"/> OTHER		01 <input type="checkbox"/> LIGHT 02 <input type="checkbox"/> DARK 03 <input checked="" type="checkbox"/> MEDIUM 04 <input type="checkbox"/> DYED 05 <input type="checkbox"/> THICK 06 <input type="checkbox"/> WIRY 07 <input type="checkbox"/> FINE 08 <input type="checkbox"/> THIN 09 <input type="checkbox"/> RECEDING 10 <input type="checkbox"/> WIG 11 <input type="checkbox"/> OTHER		01 <input type="checkbox"/> NOT APPLICABLE 02 <input type="checkbox"/> AFRO 03 <input type="checkbox"/> BUSHY 04 <input type="checkbox"/> CREW CUT 05 <input type="checkbox"/> MILITARY 06 <input checked="" type="checkbox"/> TONIC 07 <input type="checkbox"/> PROCESSED 08 <input type="checkbox"/> STRAIGHT 09 <input type="checkbox"/> WAVY/CURLY 10 <input type="checkbox"/> FLAT TOP 11 <input type="checkbox"/> GREASY 12 <input type="checkbox"/> MOHAWK 13 <input type="checkbox"/> PUNK 14 <input type="checkbox"/> BANGS 15 <input type="checkbox"/> CENTER PART 16 <input type="checkbox"/> COMBED BACK 17 <input type="checkbox"/> DIRTY 18 <input type="checkbox"/> SIDE PART 19 <input type="checkbox"/> STYLED 20 <input type="checkbox"/> OTHER			
SPEECH:		GLASSES/CONTACTS:		MARITAL STATUS:		EARRINGS:	
01 <input checked="" type="checkbox"/> NORMAL 02 <input type="checkbox"/> ACCENT - US 03 <input type="checkbox"/> ACCENT - FOREIGN 04 <input type="checkbox"/> NON-ENGLISH 05 <input type="checkbox"/> HIGH PITCHED 06 <input type="checkbox"/> LOW PITCHED 07 <input type="checkbox"/> NASAL 08 <input type="checkbox"/> RASPY 09 <input type="checkbox"/> STUTTERS 10 <input type="checkbox"/> DEEP 11 <input type="checkbox"/> DISGUISED 12 <input type="checkbox"/> SLURRED 13 <input type="checkbox"/> OTHER 14 <input type="checkbox"/> SPEECH IMPEDIMENT 15 <input type="checkbox"/> OTHER		01 <input checked="" type="checkbox"/> NONE 02 <input type="checkbox"/> YES/UNKNOWN TYPE 03 <input type="checkbox"/> PRESCRIPTION 04 <input type="checkbox"/> SUNGLASSES 05 <input type="checkbox"/> CONTACT LENS 06 <input type="checkbox"/> DESIGNER 07 <input type="checkbox"/> OTHER		01 <input checked="" type="checkbox"/> SINGLE 02 <input type="checkbox"/> MARRIED 03 <input type="checkbox"/> DIVORCED 04 <input type="checkbox"/> WIDOW 05 <input type="checkbox"/> SEPARATED 06 <input type="checkbox"/> HOMOSEXUAL 07 <input type="checkbox"/> COHABITATING 08 <input type="checkbox"/> OTHER		01 <input checked="" type="checkbox"/> YES 02 <input type="checkbox"/> NO CLOTHING: BLACK SHIRT JEANS PLACE OF BIRTH: NC	

NAME/ PIN# Auitte 8052

PAGE 5 of 9

P <input type="checkbox"/> PETITION W <input type="checkbox"/> WARRANT SUS <input type="checkbox"/> SUSPECT OFF <input type="checkbox"/> OFFENDER FI <input type="checkbox"/> FIELD INTERVIEW AR <input type="checkbox"/> ARREST MP <input type="checkbox"/> MISSING PERSON JUV <input type="checkbox"/> JUVENILE ARREST RUN <input type="checkbox"/> RUNAWAY		ARREST DATE: <u>1-30-14</u> ARREST TIME: <u>1940</u> TYPE OF ARREST: <input type="checkbox"/> CRIMINAL S <input type="checkbox"/> SUMMONED/CITED T <input type="checkbox"/> TAKEN INTO CUSTODY		CASE # <u>14-4788</u> ARRESTED <u>2</u> OF <u>2</u> ARRESTEE ARMED WITH: 01 <input type="checkbox"/> KNIFE 11 <input type="checkbox"/> FIREARM 12 <input type="checkbox"/> HANDGUN 13 <input type="checkbox"/> RIFLE 14 <input type="checkbox"/> SHOTGUN 15 <input type="checkbox"/> OTHER WEAPON 16 <input type="checkbox"/> CUTTING INSTRUMENT 17 <input type="checkbox"/> CLUB / BRASS KNUCKLES		1. <u>0010 (F)</u> 2. <u>0010 (F)</u> 3. <u>0013 (F)</u> 4. <u>0034 (M) X 3</u> 5. <u>1032 (M)</u> 6. <u>0000 (M)</u> DISPOSITION OF ARREST UNDER 18: H <input type="checkbox"/> HANDLED WITHIN DEPARTMENT R <input type="checkbox"/> REFERRED TO OTHER AUTHORITY	
LOCATION OF ARREST <u>903 MURFREESBORO RD #146</u>		ARREST #: <u>8</u>		DR. LICENSE #: <u>11 800 987</u>		STATE: <u>TN</u>	
SOCIAL SECURITY #: <u>307982862</u>		NAME: LAST: <u>BUSARD</u>		FIRST: <u>NATHAN</u>		MIDDLE: <u>ANDREW</u>	
HOUSE #: <u>407</u>		STREET ADDRESS: <u>PARK AVE</u>		CITY: <u>LEBANON</u>		STATE: <u>TN</u>	
AGE: <u>26</u>		SEX: <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> UNKNOWN		RACE: <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> INDIAN <input type="checkbox"/> ASIAN <input type="checkbox"/> OTHER		ETHNICITY: <input type="checkbox"/> HISPANIC <input checked="" type="checkbox"/> NON-HISPANIC <input type="checkbox"/> UNKNOWN	
DOB: <u>6-1-87</u>		HEIGHT: FEET: <u>5</u> INCHES: <u>11</u>		WEIGHT: <u>160</u>		EYES: ALB <input type="checkbox"/> ALBINO BLK <input type="checkbox"/> BLACK BLU <input type="checkbox"/> BLUE BRN <input type="checkbox"/> BROWN	
		HAIR: BLK <input type="checkbox"/> BLACK BLN <input type="checkbox"/> BLONDE BRN <input type="checkbox"/> BROWN DBR <input type="checkbox"/> DARK BROWN		LBR <input type="checkbox"/> LIGHT BROWN GRY <input type="checkbox"/> GRAY RED <input type="checkbox"/> RED XXX <input type="checkbox"/> UNKNOWN COMPLETELY BALD		FINGERPRINTED: <input type="checkbox"/> YES <input type="checkbox"/> NO PHOTO TAKEN: <input type="checkbox"/> YES <input type="checkbox"/> NO	
OFF. PRESENT: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		OCCUPATION:		EMPLOYED BY: <u>UNEMPLOYED</u>		SCHOOL:	
HANDICAP?: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HOW:		GANG AFFILIATION: <u>LATIN KINGS</u>		DRUG TEST: TYPE:	
TATTOOS.....DESCRIBE <u>5 POINT CROWN L NECK</u>		AMPUTATIONS...DESCRIBE		DEFORMITIES...DESCRIBE		SCARS.....DESCRIBE	
OTHER TRAITS...DESCRIBE		COURT: <u>BSII</u>		DATE AND TIME: <u>4-15-14 1pm</u>			
DISTINCT FEATURES:				APPEARANCE:			
01 <input type="checkbox"/> AMPUTATION 02 <input type="checkbox"/> ARTIFICIAL LIMB 03 <input type="checkbox"/> BLIND 04 <input type="checkbox"/> CANE/CRUTCH 05 <input type="checkbox"/> CRIPPLED 06 <input type="checkbox"/> DEFORMED LIMBS 07 <input type="checkbox"/> GROWTH/MOLE 08 <input type="checkbox"/> HEARING AID 09 <input type="checkbox"/> LIMP 10 <input type="checkbox"/> SKIN DISCOLORIZATION 11 <input type="checkbox"/> SPASTIC MOVEMENTS 12 <input type="checkbox"/> WHEELCHAIR 13 <input type="checkbox"/> HANDICAPPED 99 <input checked="" type="checkbox"/> OTHER				01 <input checked="" type="checkbox"/> SCAR 02 <input type="checkbox"/> DIRTY 03 <input type="checkbox"/> DISGUISE 04 <input type="checkbox"/> FLASHY 05 <input type="checkbox"/> MILITARY 06 <input type="checkbox"/> WELL GROOMED 07 <input type="checkbox"/> ANGRY 08 <input type="checkbox"/> CALM 09 <input type="checkbox"/> DISORGANIZED 10 <input type="checkbox"/> NERVOUS 11 <input type="checkbox"/> POLITE 12 <input type="checkbox"/> VIOLENT 99 <input type="checkbox"/> OTHER			
FACIAL SHAPE:				BODY BUILD:			
01 <input type="checkbox"/> BROAD 02 <input type="checkbox"/> HIGH CHEEKBONES 03 <input type="checkbox"/> LONG 04 <input type="checkbox"/> OVAL 05 <input checked="" type="checkbox"/> ROUNDED 06 <input type="checkbox"/> SQUARE 07 <input type="checkbox"/> THIN/LONG 99 <input type="checkbox"/> OTHER				01 <input type="checkbox"/> THIN 02 <input checked="" type="checkbox"/> MEDIUM/AVG 03 <input type="checkbox"/> STOCKY 04 <input type="checkbox"/> HEAVY 05 <input type="checkbox"/> OBESE 06 <input type="checkbox"/> SMALL 10 <input type="checkbox"/> LARGE 11 <input type="checkbox"/> MUSCULAR 99 <input type="checkbox"/> OTHER			
TEETH:		COMPLEXION:		FACIAL HAIR:			
01 <input type="checkbox"/> BRACES 02 <input type="checkbox"/> CROOKED/BROKEN 03 <input type="checkbox"/> CROOKED 04 <input type="checkbox"/> FALSE 05 <input type="checkbox"/> GAPS BETWEEN 06 <input type="checkbox"/> GOLD CAPPED 07 <input type="checkbox"/> SILVER CAPPED 08 <input type="checkbox"/> MISSING 09 <input type="checkbox"/> STAINED/DECAYED 10 <input type="checkbox"/> JEWEL STUDDED 99 <input checked="" type="checkbox"/> NORMAL		01 <input type="checkbox"/> PALE/SHALLOW 02 <input type="checkbox"/> LIGHT/FAIR 03 <input checked="" type="checkbox"/> MEDIUM/AVG 04 <input type="checkbox"/> DARK 05 <input type="checkbox"/> TANNED 06 <input type="checkbox"/> JAUNDICED 07 <input type="checkbox"/> ACNE 08 <input type="checkbox"/> FRECKLED 09 <input type="checkbox"/> POCKED 10 <input type="checkbox"/> RUDDY 11 <input type="checkbox"/> CLEAR 12 <input type="checkbox"/> OLIVE 13 <input type="checkbox"/> WEATHERED 14 <input type="checkbox"/> WRINKLED 15 <input type="checkbox"/> UNKNOWN 99 <input type="checkbox"/> OTHER		01 <input type="checkbox"/> NOT APPLICABLE 02 <input checked="" type="checkbox"/> CLEAN SHAVEN 03 <input type="checkbox"/> UNSHAVEN 04 <input type="checkbox"/> SIDEBURNS 05 <input type="checkbox"/> MUSTACHE 06 <input type="checkbox"/> FU MANCHU 07 <input type="checkbox"/> LOWER LIP 08 <input type="checkbox"/> GOATEE 09 <input type="checkbox"/> FULL BEARD 10 <input type="checkbox"/> SCRAGGLY BEARD 11 <input type="checkbox"/> SHORT BEARD 12 <input type="checkbox"/> THIN MUSTACHE 13 <input type="checkbox"/> THICK MUSTACHE 99 <input type="checkbox"/> OTHER			
LENGTH OF HAIR:		HAIR SHADED/TYPER:		HAIR STYLE:			
01 <input type="checkbox"/> SHAVED 02 <input type="checkbox"/> BALD 03 <input type="checkbox"/> BALDING 04 <input checked="" type="checkbox"/> SHORT 05 <input type="checkbox"/> NECK LENGTH 06 <input type="checkbox"/> COLLAR LENGTH 07 <input type="checkbox"/> SHOULDER LENGTH 08 <input type="checkbox"/> LONG 09 <input type="checkbox"/> PUNK STYLE 99 <input type="checkbox"/> OTHER		01 <input type="checkbox"/> LIGHT 02 <input checked="" type="checkbox"/> DARK 03 <input type="checkbox"/> HIGHLIGHTED 04 <input type="checkbox"/> DYED 05 <input type="checkbox"/> THICK 06 <input type="checkbox"/> WIRY 07 <input type="checkbox"/> FINE 08 <input type="checkbox"/> THIN 09 <input type="checkbox"/> RECEDING 10 <input type="checkbox"/> WIG 99 <input type="checkbox"/> OTHER		01 <input type="checkbox"/> NOT APPLICABLE 02 <input type="checkbox"/> AFRO 04 <input type="checkbox"/> BUSHY 05 <input type="checkbox"/> CREW CUT 06 <input checked="" type="checkbox"/> SHORT 07 <input type="checkbox"/> PONYTAIL 08 <input type="checkbox"/> PROCESSED 09 <input type="checkbox"/> STRAIGHT 10 <input type="checkbox"/> WAVY/CURLY 11 <input type="checkbox"/> FLAT TOP 12 <input type="checkbox"/> GREASY 13 <input type="checkbox"/> MOHAWK 14 <input type="checkbox"/> PUNK 15 <input type="checkbox"/> BANGS 16 <input type="checkbox"/> CENTER PART 17 <input type="checkbox"/> COMBED BACK 18 <input type="checkbox"/> DIRTY 19 <input type="checkbox"/> SIDE PART 20 <input type="checkbox"/> STYLED 99 <input type="checkbox"/> OTHER			
SPEECH:		GLASSES/CONTACTS:		MARITAL STATUS:		EARRINGS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
01 <input checked="" type="checkbox"/> ACCENT 02 <input type="checkbox"/> ACCENT - US 03 <input type="checkbox"/> ACCENT - FOREIGN 04 <input type="checkbox"/> NON-ENGLISH 05 <input type="checkbox"/> HIGH PITCHED 06 <input type="checkbox"/> LOW PITCHED 07 <input type="checkbox"/> NASAL 08 <input type="checkbox"/> RASPY 09 <input type="checkbox"/> STUTTERS 10 <input type="checkbox"/> DEEP 11 <input type="checkbox"/> DISGUISED 12 <input type="checkbox"/> SLURRED 13 <input type="checkbox"/> OTHER 14 <input type="checkbox"/> SPEECH IMPEDIMENT 99 <input type="checkbox"/> OTHER		01 <input checked="" type="checkbox"/> WORN 02 <input type="checkbox"/> YES/UNKNOWN TYPE 03 <input type="checkbox"/> PRESCRIPTION 04 <input type="checkbox"/> SUNGLASSES 05 <input type="checkbox"/> CONTACT LENS 06 <input type="checkbox"/> DESIGNER 99 <input type="checkbox"/> OTHER		01 <input checked="" type="checkbox"/> SINGLE 02 <input type="checkbox"/> MARRIED 03 <input type="checkbox"/> DIVORCED 04 <input type="checkbox"/> WIDOW 05 <input type="checkbox"/> SEPARATED 06 <input type="checkbox"/> HOMOSEXUAL 07 <input type="checkbox"/> COHABITATING 99 <input type="checkbox"/> OTHER		U.S. CITIZEN: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO CLOTHING: <u>RED JACKET</u> <u>GRAY PANTS</u> PLACE OF BIRTH: <u>GRAY PANTS</u>	

NAME/ PIN# Prville 0012PAGE 7 OF 9

OFFICER: Pruitt PIN #: 0042 DATE: 1/30/14 CASE #: 14-4788

On January 30th, 2014, I received intel of a possible meth lab at 903 Murfreesboro Rd (Knight's Inn) in room 148. Sgt. Hawkins and I responded to the room to conduct a knock and talk with the occupants of the room. Upon my arrival, I knocked on the door and female identified as Stephanie Mosley answered the door. I explained to Ms. Mosley that we had received information of a possible meth lab in the room and we were there to investigate. Ms. Mosley adamantly denied a meth lab being in the room. I asked for consent to step in the room and she stated that it was not her room. She further stated that the lessee was in Smith Co. jail. I explained to her that the management would be asking her to leave giving the circumstance. Ms. Mosley opened the door and told us to come in. She presented me with a mirror that had a crushed pill (Percocet) on it with a straw. Mosley stated that it was all she had. I asked Ms. Mosley where her belongings were and she pointed at the front corner of the room. I asked for consent to search her bags and she granted it. Upon consent search, I located several syringes in a plastic bag. I asked Ms. Mosley if she was diabetic and she stated "no". Ms. Mosley was sitting on the bed closest to the bathroom and I noticed a camo backpack sitting by her left leg. I placed Ms. Mosley under arrest for Simple Possession and Paraphernalia. A search incident to arrest was conducted of Ms. Mosley and the immediate area of her. I located Mason Jars with residue, plastic tubing, coffee filters, lithium batteries and drain cleaner in the camo backpack. A male was found hiding in the bathroom and was identified as Nathan Busard. Mr. Busard was also placed under arrest. I also noticed several pills later identified as Methadone and Alprazolam laying on the front counter in plain-view. Officer Bryan transported both subjects to WCSO for booking. Officer Chris Luna and Brian Blackburn were notified to respond. For the safety of the guest in other rooms, I had management relocate them to other rooms. Ms. Mosley was found to have a plastic baggy with approximately 2grams of white powdery substance believed to be methamphetamine and a green pill container with 4 pills in her bra at booking. Luna and Blackburn located several components commonly used in the manufacture of methamphetamine and approximately 1 gram of white powdery substance believed to be methamphetamine. Both Mosley and Busard were charged with constructive possession of all the narcotics, narcotic equipment and paraphernalia inside the room. The Tennessee Methamphetamine Task Force responded to clean up all the items located inside the room. The pills and meth were placed into LPD evidence.

APPROVING OFFICER:  PIN: 0042 DATE APPROVED: 1/30/14

Page: 9 of 9

UNITED STATES DISTRICT COURT

MIDDLE

District of

TENNESSEE

United States of America

V.

ORDER SETTING CONDITIONS OF RELEASE

RYAN MOORE

Case Number: 3:13-00097-24

Defendant

IT IS ORDERED that the release of the defendant is subject to the following conditions:

- (1) The defendant shall not commit any offense in violation of federal, state or local law while on release in this case.
- (2) The defendant shall immediately advise the court, defense counsel and the U.S. attorney in writing before any change in address and telephone number.
- (3) The defendant shall appear at all proceedings as required and shall surrender for service of any sentence imposed as directed. The defendant shall appear at (if blank, to be notified) _____

Place

on _____

Date and Time

Release on Personal Recognizance or Unsecured Bond

IT IS FURTHER ORDERED that the defendant be released provided that:

- (✓) The defendant promises to appear at all proceedings as required and to surrender
- () The defendant executes an unsecured bond binding the defendant to pay _____ dollar _____)
in the event of a failure to appear as required or to surrender as directed for

DISTRIBUTION: COURT DEFENDANT PRETRIAL SERVICES U.S. ATTORNEY U.S. MARSHAL

SCANNED

Additional Conditions of Release

Upon finding that release by one of the above methods will not by itself reasonably assure the appearance of the defendant and the safety of other persons and the community,

IT IS FURTHER ORDERED that the release of the defendant is subject to the conditions marked below:

() (6) The defendant is placed in the custody of:

(Name of person or organization)

(Address)

(City and state)

(Tel. No.)

who agrees (a) to supervise the defendant in accordance with all the conditions of release, (b) to use every effort to assure the appearance of the defendant at all scheduled court proceedings, and (c) to notify the court immediately in the event the defendant violates any conditions of release or disappears.

Signed: _____

Custodian or Proxy

Date

(X) (7) The defendant shall:

RM (X) (a) report to the U.S. Pretrial Services as directed

telephone number (615) 736-5771, not later than _____

() (b) execute a bond or an agreement to forfeit upon failing to appear as required the following sum of money or designated property:

() (c) post with the court the following indicia of ownership of the above-described property, or the following amount or percentage of the above-described

RM (X) (d) execute a bail bond with solvent sureties in the amount of \$ _____

RM (X) (e) maintain or actively seek employment, or attend school as directed

RM (X) (f) maintain or commence an education program

RM (X) (g) surrender any passport to: Pretrial Services

RM (X) (h) obtain no passport

RM (X) (i) abide by the following restrictions on personal association, place of abode, or travel: Restricted to Middle District of TN

unless pre-approved for out of district travel by Pretrial Services

RM (X) (j) avoid all contact, directly or indirectly, with any persons who are or who may become a victim or potential witness in the subject investigation or prosecution, including but not limited to: co-defendants without prior approval of Pretrial Services

() (k) undergo medical or psychiatric treatment and/or remain in an institution as follows: _____

() (l) return to custody each (week) day as of _____ o'clock after being released each (week) day as of _____ o'clock for employment, schooling, or the following limited purpose(s): _____

() (m) maintain residence at a halfway house or community corrections center, as deemed necessary by the pretrial services office or supervising officer.

() (n) refrain from possessing a firearm, destructive device, or other dangerous weapons.

() (o) refrain from () any () excessive use of alcohol.

RM (X) (p) refrain from use or unlawful possession of a narcotic drug or other controlled substances defined in 21 U.S.C. § 802, unless prescribed by a licensed medical practitioner.

RM (X) (q) submit to any method of testing required by the pretrial services office or the supervising officer for determining whether the defendant is using a prohibited substance. Such methods may be used with random frequency and include urine testing, the wearing of a sweat patch, a remote alcohol testing system, and/or any form of prohibited substance screening or testing.

RM (X) (r) participate in a program of inpatient or outpatient substance abuse therapy and counseling if deemed advisable by the pretrial services office or supervising officer.

RM (X) (s) refrain from obstructing or attempting to obstruct or tamper, in any fashion, with the efficiency and accuracy of any prohibited substance testing or electronic monitoring which is (are) required as a condition(s) of release.

() (t) participate in one of the following home confinement program components and abide by all the requirements of the program which () will or () will not include electronic monitoring or other location verification system. You shall pay all or part of the cost of the program based upon your ability to pay as determined by the pretrial services office or supervising officer.

() (i) Curfew. You are restricted to your residence every day () from _____ to _____, or () as directed by the pretrial services office or supervising officer; or

() (ii) Home Detention. You are restricted to your residence at all times except for employment; education; religious services; medical, substance abuse, or mental health treatment; attorney visits; court appearances; court-ordered obligations; or other activities as pre-approved by the pretrial services office or supervising officer; or

() (iii) Home Incarceration. You are restricted to your residence at all times except for medical needs or treatment, religious services, and court appearances pre-approved by the pretrial services office or supervising officer.

RM (X) (u) report as soon as possible to the pretrial services office or supervising officer any contact with any law enforcement personnel, including, but not limited to, any arrest, questioning, or traffic stop, and within 48 hrs.

RM (X) (v) Shall permit Pretrial Services Officer to visit you at home or elsewhere at any time, and allow Pretrial Services Officer to confiscate any contraband in plain view.

() (w)

() (x)

DISTRIBUTION: COURT DEFENDANT PRETRIAL SERVICES U.S. ATTORNEY U.S. MARSHAL

Advice of Penalties and Sanctions

TO THE DEFENDANT:

YOU ARE ADVISED OF THE FOLLOWING PENALTIES AND SANCTIONS:

A violation of any of the foregoing conditions of release may result in the immediate issuance of a warrant for your arrest, a revocation of release, an order of detention, and a prosecution for contempt of court and could result in a term of imprisonment, a fine, or both.

The commission of a Federal offense while on pretrial release will result in an additional sentence of a term of imprisonment of not more than ten years, if the offense is a felony; or a term of imprisonment of not more than one year, if the offense is a misdemeanor. This sentence shall be in addition to any other sentence.

Federal law makes it a crime punishable by up to 10 years of imprisonment, and a \$250,000 fine or both to obstruct a criminal investigation. It is a crime punishable by up to ten years of imprisonment, and a \$250,000 fine or both to tamper with a witness, victim or informant; to retaliate or attempt to retaliate against a witness, victim or informant; or to intimidate or attempt to intimidate a witness, victim, juror, informant, or officer of the court. The penalties for tampering, retaliation, or intimidation are significantly more serious if they involve a killing or attempted killing.

If after release, you knowingly fail to appear as required by the conditions of release, or to surrender for the service of sentence, you may be prosecuted for failing to appear or surrender and additional punishment may be imposed. If you are convicted of:

- (1) an offense punishable by death, life imprisonment, or imprisonment for a term of fifteen years or more, you shall be fined not more than \$250,000 or imprisoned for not more than 10 years, or both;
- (2) an offense punishable by imprisonment for a term of five years or more, but less than fifteen years, you shall be fined not more than \$250,000 or imprisoned for not more than five years, or both;
- (3) any other felony, you shall be fined not more than \$250,000 or imprisoned not more than two years, or both;
- (4) a misdemeanor, you shall be fined not more than \$100,000 or imprisoned not more than one year, or both.

A term of imprisonment imposed for failure to appear or surrender shall be in addition to the sentence for any other offense. In addition, a failure to appear or surrender may result in the forfeiture of any bond posted.

Acknowledgment of Defendant

I acknowledge that I am the defendant in this case and that I am aware of the conditions of release. I promise to obey all conditions of release, to appear as directed, and to surrender for service of any sentence imposed. I am aware of the penalties and sanctions set forth above.



Signature of Defendant

Directions to United States Marshal

- (x) The defendant is ORDERED released after processing.
() The United States marshal is ORDERED to keep the defendant in custody until notified by the clerk or judicial officer that the defendant has posted bond and/or complied with all other conditions for release. The defendant shall be produced before the appropriate judicial officer at the time and place specified, if still in custody.

Date: June 3, 2013



Signature of Judicial Officer

E. CLINTON KNOWLES, U.S. MAGISTRATE JUDGE
Name and Title of Judicial Officer

DISTRIBUTION: COURT DEFENDANT PRETRIAL SERVICE U.S. ATTORNEY U.S. MARSHAL

LEBANON POLICE DEPARTMENT

INCIDENT REPORT

Case # <u>14 - 4806</u> Occurred on: <u>1 / 30 / 14</u> to <u>1 / 30 / 14</u>		Occurred Time: <u>22 : 26</u> to <u>22 : 26</u>	
Report Date: <u>1 / 30 / 14</u> Report Time: <u>22 : 26</u>		Reporting Officer PIN: <u>1057</u>	
Reporting Officer: <u>C. BRYAN</u> Other PINs: <u>1099, 1016</u>		Location of Incident: House # <u>921</u>	
1 st Street: <u>MURFREESBORO RD</u>		Apt #: <u></u>	Zone: <u>A</u>
NCIC Code: (1) <u>0040</u>	Description: (1) <u>DRUG - PARAPHERNALIA</u>	A/C <input checked="" type="checkbox"/>	F/M <input checked="" type="checkbox"/>
(2) <u>7310</u>	(2) <u>Alte Intoxication</u>	A/C <input checked="" type="checkbox"/>	F/M <input checked="" type="checkbox"/>
(3) <u></u>	(3) <u></u>	A/C	F/M
(4) <u></u>	(4) <u></u>	A/C	F/M
(5) <u></u>	(5) <u></u>	A/C	F/M
Location: (01) Air/Bus/Train Terminal (09) Drug Store/Dr's Office/Hospital (17) Liquor Store (02) Bank/Savings and Loan (10) Field/Woods (18) Parking Lot (03) Bar/Night Club (11) Government/Public Building (19) Rental/Storage (04) Church/Synagogue/Temple (12) Grocery/Supermarket (20) Residence/Home (05) Office Building (13) Highway/Road/Alley (21) Restaurant (06) Construction Site (14) Hotel/Motel (22) School/College (07) Convenience Store (15) Jail/Prison (23) Gas Station (08) Department Store (16) Lake/Waterway (24) Specialty Store (25) Other/Unknown			
Bias Code: <u></u> Number of Premises Entered: <u>0</u> Method of Entry: (Force) <input checked="" type="checkbox"/> Home Invasion: (Yes) <input checked="" type="checkbox"/>			
Offender Used: (Alcohol) (Computer Equipment) <input checked="" type="checkbox"/> (Not Applicable) Type of Criminal Activity: <u>P.T.U.</u>			
Weapon Used: (11) Firearm (15) Other Firearm (40) Personal Weapon <input checked="" type="checkbox"/> (12) Handgun (20) Knife (50) Poisoning (85) Asphyxiation (13) Rifle (30) Blunt Object (60) Explosives (90) Other (14) Shotgun (35) Motor Vehicle (65) Fire/Incendiary (95) Unknown			
Family Violence: (Yes) <input checked="" type="checkbox"/> Gang Activity: (Yes) <input checked="" type="checkbox"/> (Unk) Type of Gang Activity: <u></u>			
Reviewed by PIN: <u>1099</u> Assigned to PIN: <u></u> Case Status: (Open) (Closed) (Active)			
Name Reason Code: (VDM) Victim of Domestic (VIND) Victim is Individual (VBUS) Victim is Business (VGOV) Victim is Government (VFIN) Victim is Financial (VPOL) Victim is Police # <u>1</u> (VREL) Victim is Religious Org. () Victim is Complainant (VUNK) Victim is Unknown (COM) Complainant (VSEC) Victim is Society (WIT) Witness			
SSN: <u>- -</u> Last Name: <u>OF TN</u> First: <u>STATE</u> MI: <u></u> DOB: <u>/ /</u> Sex: <u></u> Race: <u></u>			
Street Address: <u></u> City: <u></u> State: <u></u> Zip: <u></u>			
Employer: <u></u> Home Phone: () - <u></u> Work Phone: () - <u></u>			
Injury Type: (A) None (B) Broken Bones (I) Internal Injury (L) Severe Laceration (M) Minor Injury (O) Major Injury (T) Loss of Teeth (U) Unconsciousness			
Relationship of Victim to Offender: <u>5 r</u> Victim connected to Offense #: <u>/</u>			
(SE) Spouse (GP) Grandparent (SS) Step Sibling (BE) Baby Sitter (EE) Employee (CS) Common Law Spouse (GC) Grandchild (OF) Other Family (BG) Boy/Girl Friend (ER) Employer (PA) Parent (IL) In-Law (AQ) Acquaintance (CF) Child of bg (RU) Unknown (SB) Sibling (SP) Step Parent (FR) Friend (HH) Homosexual Rel. <input checked="" type="checkbox"/> (CH) Child (SC) Step Child (NE) Neighbor (XS) Ex Spouse (VO) Vic / Off			
Was victim a college student: (Yes) <input checked="" type="checkbox"/> Did offense occur on campus: (Yes) <input checked="" type="checkbox"/>			
Domestic Violence: DV Form (Yes) (No) HomeSafe (Yes) (No) Arrest Made: (Yes) (No)			
Was children harmed: (Yes) (No) (None) Was a violation of an order of protection involved? (Yes) (No)			
Negligent Manslaughter: <u></u> Justifiable Homicide: <u></u> Officer Killed or Assaulted: <u></u>			